Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
1.	Your full name							
	Write the name that is on	Steven						
	your government-issued picture identification (for example, your driver's	First name	First name					
		Bruce						
	license or passport).	Middle name	Middle name					
	Bring your picture	Berzon						
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)					
2.	All other names you have used in the last 8 years	Steven B Berzon						
	Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1531						

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 2 of 67
Case number (if known)

Debtor 1 Steven Bruce Berzon

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	-	Business name(s)		
		EINs	-	EINs		
5.	Where you live	756 Porter Circle		If Debtor 2 lives at a different address:		
		Lindenhurst, IL 60046 Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code		
		Lake				
		County	-	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	-	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:		Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 3 of 67

Debtor 1 Steven Bruce Berzon

Case number (if known)

ar	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check (Form			of each, see <i>Notice Requ</i> page 1 and check the ap) for Individuals Filing	for Bankruptcy
	choosing to file under	■ Cl	hapter 7					
		☐ Cl	hapter 11					
		☐ CI	hapter 12					
		☐ CI	hapter 13					
3.	How you will pay the fee	_	about how yo	u may pay. Typ attorney is subr	en I file my petition. Pleasically, if you are paying the mitting your payment on your	e fee yourself, you may pa	ay with cash, cashier's	s check, or money
					allments. If you choose the second control of the second control o	his option, sign and attach	n the <i>Application for Ir</i>	ndividuals to Pay
			but is not req	uired to, waive y	ived (You may request the your fee, and may do so o	nly if your income is less	than 150% of the offic	cial poverty line that
					nd you are unable to pay the Chapter 7 Filing Fee Waive			
).	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye	es.					
			District		When	Cas	se number	
			District		When _	Cas	se number	
			District		When	Cas	se number	
10.	Are any bankruptcy	■ No)					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Rela	ationship to you	
			District		When	Case	e number, if known	
			Debtor			Rela	ationship to you	
			District		When	Case	e number, if known	
11.	Do you rent your residence?	■ No	Go to I	ne 12.				
	residence:	☐ Ye	es. Has yo	ur landlord obta	ained an eviction judgmen	t against you?		
				No. Go to line	12.			
				Yes. Fill out Initial this bankruptcy	itial Statement About an E petition.	viction Judgment Against	! You (Form 101A) and	d file it as part of

Document Page 4 of 67 Case number (if known) Steven Bruce Berzon Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a

as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

separate legal entity such

Number, Street, City, State & ZIP Code

ole proprietorship, use a
eparate sheet and attach
to this petition.

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

For a definition of *small* business debtor, see 11 U.S.C. § 101(51D).

■ No.
I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 5 of 67

Debtor 1 Steven Bruce Berzon

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 67 Case number (if known) Debtor 1 Steven Bruce Berzon Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion ■ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Steven Bruce Berzon Signature of Debtor 2 Steven Bruce Berzon

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on December 27, 2019

MM / DD / YYYY

Debtor 1 Steven Bruce Berzon Document Page 7 of 67 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joel A.	Schechter	Date	December 27, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Joel A. Sc	hechter 3122099		
Printed name			
Law Office	es of Joel A. Schechter		
Firm name			
53 West Ja	ackson Blvd		
Suite 1522			
Chicago, I	L 60604		
	City, State & ZIP Code		
Contact phone	312-332-0267	Email address	joelschechter1953@gmail.com
3122099 IL	_		
Bar number & St	tato		

		Docume	ent Page 8 of 67	
Fill in this infor	mation to identify your	case:		
Debtor 1	Steven Bruce Be	rzon		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	322,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	258,099.83
	1c. Copy line 63, Total of all property on Schedule A/B	\$	580,099.83
Paı	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	377,747.11
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	24,162.75
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	238,965.30
	Your total liabilities	\$	640,875.16
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,684.17
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,048.05
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Case 19-36550 Doc 1 Document

Page 9 of 67
Case number (if known) Debtor 1 Steven Bruce Berzon

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

12,541.25

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	24,162.75
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,162.75

	Cas	se 19-36550	Doc 1	Filed 12/30/19 Document	Entered 12/30/1 Page 10 of 67	9 19:14:03	esc Main	
Fill	in this inform	ation to identify	your case and th	is filing:				
Deb	otor 1	Steven Bruc		Name	Last Name			
	otor 2 use, if filing)	First Name	Middle	Name	Last Name			
Unit	ted States Ban	kruptcy Court for	the: NORTHER	N DISTRICT OF ILLIN	NOIS			
Cas	se number				-		☐ Check if this is an amended filing	
_		m 106A/E	=					
<u>Sc</u>	chedule	: A/B: Pi	roperty				12/15	
nfor	mation. If more ver every questi	space is needed, a	attach a separate sl	neet to this form. On the	e are filing together, both are e top of any additional pages vn or Have an Interest In			
Do	o vou own or ha	ve any legal or eg	uitable interest in a	nv residence. building.	land, or similar property?			
_	_		,	,	p. op			
	No. Go to Part 2 Yes. Where is							
-	res. where is	ne property?						
1.1				What is the property	? Check all that apply			
	756 Porter	Circle available, or other des	cription	Single-family h	nome		I claims or exemptions. Put	
	Street address, ii	avaliable, of other des	сприоп	Duplex or mult Condominium	ti-unit building or cooperative	the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property		
	Lindenhurs	t IL	60046-0000	☐ Manufactured☐ Land	or mobile home	Current value of the entire property?	Current value of the portion you own?	
	City	State	ZIP Code	☐ Investment pro	operty	\$322,000.00	\$322,000.00	
				☐ Timeshare ☐ Other		(such as fee simple,	of your ownership interest tenancy by the entireties, or	
				Who has an interest Debtor 1 only	in the property? Check one	a life estate), if know	n.	
	Lake			Debtor 2 only				
	County			Debtor 1 and [Debtor 2 only	— Check if this is o	ommunity property	
					f the debtors and another	(see instructions)	ommunity property	
				Other information you property identification	ou wish to add about this iter on number:	n, such as local		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$322,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 11 of 67 Case number (if known)

Debtor 1 Steven Bruce Berzon 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **GMC** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Terrain** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$4,500.00 \$2,250.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Dodge Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Charger Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$0.00 \$0.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **BMW** 3.3 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **X5** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2017 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$35,000.00 \$35,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$37,250.00 pages you have attached for Part 2. Write that number here.....= Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... kitchen table+6 chairs, sectional, (4) dressers, (4) nite stands, (4) beds, kitchen utensils, pots, pans, dryer, washer, dishwasher, (2) \$0.00 refrigerators, stove

Official Form 106A/B Schedule A/B: Property page 2

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 12 of 67

Case number (if known) Document Debtor 1 Steven Bruce Berzon 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$0.00 computer, televisions 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... \$0.00 golf clubs, camera 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$0.00 necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe..... \$0.00 Bichon poodle 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$0.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 13 of 67
Case number (if known) Document Debtor 1 Steven Bruce Berzon 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... checking Bank of America, xxxxxxx9954 \$0.00 17.1. Hungtington Bank, xxxxxxx7179 \$0.00 checking 17.2. Fifth Third Bank, xxxxxxx8377 \$0.00 17.3. checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Pension** Pension through employment with Allstate \$0.00 401(k) **Allstate** \$220,849.83 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

		Case 19-	-36550	Doc 1	Filed 12/30/19	Entered 12/30/19 19:14:03	Desc Main		
De	ebtor 1	Steven Bru	ce Berzon		Document	Page 14 of 67 Case number (if known)			
	☐ Yes	lı	nstitution nai	me and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):		
25.	Trusts, ■ No	equitable or fo	uture intere	sts in prope	rty (other than anythin	g listed in line 1), and rights or powers ex	ercisable for your benefit		
	_	Give specific in	nformation ab	oout them					
26.	_Examp				ts, and other intellecture roceeds from royalties a	al property ind licensing agreements			
	■ No □ Yes. Give specific information about them								
27.	77. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses								
	■ No □ Yes.	Give specific in	nformation ab	oout them					
M	oney or p	property owed	to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.		
28.	_	unds owed to	you						
	■ No □ Yes. 0	Give specific inf	formation ab	out them, inc	cluding whether you alre	ady filed the returns and the tax years			
	■ No				usal support, child suppo	ort, maintenance, divorce settlement, propert	y settlement		
	Examp		ges, disabilit npaid loans y	y insurance p	payments, disability bend someone else	efits, sick pay, vacation pay, workers' compo	ensation, Social Security		
	Interest	ts in insurance	e policies			LIOA) and the horse sector of the sector of			
	□ No				-	HSA); credit, homeowner's, or renter's insura	ince		
	■ Yes. N	Name the insur		ny of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:		
			term	life throug	jh employment	spouse	\$0.00		
			hom	eowner's			\$0.00		
			healt	th through	employment		\$0.00		
	If you a someon		ary of a living		someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to re	ceive property because		
	 Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim 								

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 15 of 67

Case number (if known) Document Debtor 1 Steven Bruce Berzon

34.	Other contingent and unliquidated claims of every nature, inclu	uding counterclaims of	of the debtor and rights to	set off claims
[☐ Yes. Describe each claim			
ı	Any financial assets you did not already list ■ No □ Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here		-	\$220,849.83
Par	t 5: Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	te in Part 1.	
37.	Do you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Par	t 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
46.	Do you own or have any legal or equitable interest in any farm-	- or commercial fishin	g-related property?	
	■ No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Par	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
53.	Do you have other property of any kind you did not already list	?		
_	Examples: Season tickets, country club membership			
_	No			
ı	☐ Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
	,			
Par	t 8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$322,000.00
	Part 2: Total vehicles, line 5	\$37,250.00		
57.	Part 3: Total personal and household items, line 15	\$0.00		
58.	Part 4: Total financial assets, line 36	\$220,849.83		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.		\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$258,099.83	Copy personal property t	otal \$258,099.83
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$580,099.83

Official Form 106A/B Schedule A/B: Property page 6

		Document	Page 16 of 67	_	
Fill in th	is information to identify your	case:			
Debtor 1	Steven Bruce Be	rzon]	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	states Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case nu	mher				
(if known)				☐ Check if this is an amended filing	
Officia	al Form 106C				
	edule C: The Pro	operty You Cla	im as Exempt	4/19	
			•		
the prope needed, f	rty you listed on Schedule A/B: I	Property (Official Form 106A/B)	together, both are equally responsible for as your source, list the property that you nal Page as necessary. On the top of any	claim as exempt. If more space is	
specific of any appli funds—re exemptic	dollar amount as exempt. Alter icable statutory limit. Some ex nay be unlimited in dollar amo	natively, you may claim the f emptions—such as those for unt. However, if you claim an	e amount of the exemption you claim. ull fair market value of the property be health aids, rights to receive certain b exemption of 100% of fair market valu by is determined to exceed that amount	ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the	
•	Identify the Property You Cla	nim as Exempt			
1. Whic	ch set of exemptions are you c	laiming? Check one only, ever	n if your spouse is filing with you.		
■ ∨	ou are claiming state and federal	nonhankruntcy exemptions	11 I I S C & 522(b)(3)		
_	ou are claiming federal exemptio		11 0.0.0. 3 022(0)(0)		
			empt, fill in the information below.		
	description of the property and lin	•	Amount of the exemption you claim	Specific laws that allow exemption	
	dule A/B that lists this property	portion you own	7 and and oxemption you diam.	opecinic laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	Porter Circle Lindenhurst,	IL \$322,000.00	\$15,000.00	735 ILCS 5/12-901	
	46 Lake County from Schedule A/B: 1.1		100% of fair market value, up to any applicable statutory limit		
	sion: Pension through ployment with Allstate	\$0.00		735 ILCS 5/12-1006	
	from Schedule A/B: 21.1		■ 100% of fair market value, up to any applicable statutory limit		
	(k): Allstate	\$220,849.83	\$220,849.83	735 ILCS 5/12-1006	
Line	from Schedule A/B: 21.2		100% of fair market value, up to any applicable statutory limit		
(Sub	No	d every 3 years after that for ca	0? uses filed on or after the date of adjustmenthin 1,215 days before you filed this case	,	
	□ No	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		

Yes

	Document	Page 17 of	67		
Fill in this information to identify you	ur case:				
Debtor 1 Steven Bruce B					
Debtor 1 Steven Bruce E		Last Name			
Debtor 2	made Hame	2401144110			
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLIN	IOIS			
Casa number					
Case number (if known)				☐ Check	if this is an
()				_	led filing
				amend	led illing
Official Form 106D					
Schedule D: Creditors	s Who Have Claims S	ecured by	y Propert	У	12/15
Be as complete and accurate as possible.	If two married people are filing together	both are equally	rosponsible for su	unnlying correct informs	tion If more space
is needed, copy the Additional Page, fill it					
number (if known).					
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit t	this form to the court with your other so	chedules. You ha	ve nothing else t	to report on this form.	
_	•		g		
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
2. List all secured claims. If a creditor has	more than one secured claim. list the credit	or separately	olumn A	Column B	Column C
for each claim. If more than one creditor has	s a particular claim, list the other creditors in	n Part 2. As 🐪 🗛	mount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabet	ical order according to the creditor's name.		o not deduct the alue of collateral.	that supports this claim	portion If any
2.1 Bank of America	Describe the property that secures the		\$4,368.04	\$4,500.00	\$0.00
Creditor's Name	2012 GMC Terrain		ψ 1,00010 I	<u> </u>	
	2012 GMG Terrain				
P.O. Box 15220					
Wilmington, DE	As of the date you file, the claim is: Ch	eck all that			
19886-5220	apply. Contingent				
Number, Street, City, State & Zip Code	_				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	_				
Debtor 1 only	An agreement you made (such as models)	ortgage or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mecha	anic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account numbe	r 1057			
O Donk of America	Describe the manufactuation of the		¢c coo oo	¢c 500 00	£400.00
2.2 Bank of America Creditor's Name	Describe the property that secures the	Claim:	\$6,602.22	\$6,500.00	\$102.22
Creditor's Name	2012 Dodge Charger				
P.O. Box 15220					
Wilmington, DE	As of the date you file, the claim is: Ch	eck all that			
19886-5220	apply.				
	☐ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
— Check one.	_				
Debtor 1 only	An agreement you made (such as mo	ortgage or secured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account numbe	r 0203			

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 18 of 67

Debtor 1 Steven Bruce Berzon	C	Case number (if known)		
First Name Middle N	lame Last Name			
BMW Bank of North				
2.3 America	Describe the property that secures the claim:	\$58,919.27	\$35,000.00	\$23,919.27
Creditor's Name	2017 BMW X5			
	As of the date you file, the claim is: Check all that			
P.O. Box 78066	apply.			
Phoenix, AZ 85062-8066	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only	car loan)	uiou		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 9107			
Huntington National	Describe the manager that account the plains	\$24,010.54	\$322,000.00	\$0.00
Creditor's Name	Describe the property that secures the claim:	ΨΣΨ,010.3Ψ	Ψ322,000.00	Ψ0.00
Cleditor S Marile	756 Porter Circle Lindenhurst, IL 60046			
P.O. Box 182387	As of the date you file, the claim is: Check all that			
Columbus, OH	apply.			
43218-2387	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	■ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 5258			
2.5 NPRTO Illinois, LLC	Describe the property that secures the claim:	\$842.76	\$500.00	\$342.76
Creditor's Name	lease purchase of mattress			
OFC Wood Data Da	As of the date you file, the claim is: Check all that			
256 West Data Dr. Draper, UT 84020	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	_			
Debtor 1 only	 An agreement you made (such as mortgage or sector car loan) 	urea		
Debtor 2 only	<u> </u>			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 6995			

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 19 of 67

Dobte	Debtor 1 Steven Bruce Berzon			Case number (if known)			
	First Name Middle N	ame Last Name					
- n -	Wells Fargo Home			¢202 004 20	¢222.000.00	¢0.00	
	Mortgage	Describe the property that secures the clai	m:	\$283,004.28	\$322,000.00	\$0.00	
	Creditor's Name	756 Porter Circle Lindenhurst, IL 60046					
	P.O. Box 14538	As of the date you file, the claim is: Check al	l th at				
	Des Moines, IA	apply.	ıınaı				
	50306-3538	Contingent					
_	Number, Street, City, State & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who	owes the debt? Check one.	Nature of lien. Check all that apply.					
■ Do	btor 1 only	■ An agreement you made (such as mortgage	o or occured				
	,	car loan)	e or secured				
	btor 2 only	_ ′					
_	btor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)				
	least one of the debtors and another	☐ Judgment lien from a lawsuit					
	eck if this claim relates to a	☐ Other (including a right to offset)					
C	ommunity debt						
Date o	lebt was incurred	Last 4 digits of account number	2557				
- Date (
				6077 747	44		
	-	Column A on this page. Write that number her	e:	\$377,747	.11		
	is is the last page of your form, add e that number here:	the dollar value totals from all pages.		\$377,747	.11		
••••							
Part 2	List Others to Be Notified for	or a Debt That You Already Listed					
trying than o	to collect from you for a debt you one creditor for any of the debts tha	e notified about your bankruptcy for a debt t we to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page.	I, and then lis	st the collection age	ncy here. Similarly, if you	have more	
trying than o	to collect from you for a debt you o	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit	I, and then lis	st the collection age	ncy here. Similarly, if you	have more	
trying than o	to collect from you for a debt you one creditor for any of the debts tha	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page.	I, and then list ors here. If yo	st the collection age ou do not have addit	ncy here. Similarly, if you ional persons to be notifi	have more	
trying than o	to collect from you for a debt you cone creditor for any of the debts that in Part 1, do not fill out or submit the	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page.	I, and then list ors here. If yo	st the collection age ou do not have addit	ncy here. Similarly, if you	have more	
trying than o	to collect from you for a debt you cone creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page. Zip Code	I, and then lisors here. If you	st the collection age ou do not have addit	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page. Zip Code	I, and then lisors here. If you	st the collection age ou do not have addit in Part 1 did you ente	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1	have more	
trying than o	to collect from you for a debt you cone creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224	owe to someone else, list the creditor in Part t you listed in Part 1, list the additional credit nis page. Zip Code	I, and then lisors here. If you	st the collection age ou do not have addit in Part 1 did you ente	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1	have more	
trying than o	to collect from you for a debt you cone creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522	owe to someone else, list the creditor in Part tyou listed in Part 1, list the additional credit nis page. Zip Code	I, and then lie ors here. If you on which line Last 4 digits o	st the collection age ou do not have addit in Part 1 did you enter of account number	ncy here. Similarly, if you ional persons to be notifier the creditor? 2.1	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State &	owe to someone else, list the creditor in Part tyou listed in Part 1, list the additional credit nis page. Zip Code	I, and then lie ors here. If you on which line Last 4 digits o	st the collection age ou do not have addit in Part 1 did you enter of account number	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1	have more	
trying than o	to collect from you for a debt you cone creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522	owe to someone else, list the creditor in Part tyou listed in Part 1, list the additional credit nis page. Zip Code	On which line On which line Last 4 digits of	e in Part 1 did you ente	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1 or the creditor? 2.2	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Con which line Con which line	st the collection age ou do not have addit in Part 1 did you enter of account number	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1 or the creditor? 2.2	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Con which line Con which line	e in Part 1 did you ente	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1 or the creditor? 2.2	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of	e in Part 1 did you enter in P	er the creditor? 2.1 er the creditor? 2.2	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Street, Ci	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of	e in Part 1 did you enter in P	ncy here. Similarly, if you ional persons to be notified the creditor? 2.1 or the creditor? 2.2	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter or account number or account number or account number or account number	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter in P	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter or account number or account number or account number or account number	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter or account number or account number or account number or account number	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code Zip Code	On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter or account number or account number or account number or account number	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter in P	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept.	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of On which line Last 4 digits of On which line Last 4 digits of	e in Part 1 did you enter in P	er the creditor? 2.2 er the creditor? 2.3	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of	e in Part 1 did you enter in P	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558 GW4W61	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of	e in Part 1 did you enter or account number	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of	e in Part 1 did you enter or account number	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558 GW4W61	eve to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of	e in Part 1 did you enter or account number	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558 GW4W61 Columbus, OH 43216	wee to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code 4 Zip Code	On which line Last 4 digits of	e in Part 1 did you enter	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558 GW4W61 Columbus, OH 43216	wee to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code Zip Code Zip Code	On which line Last 4 digits of	e in Part 1 did you enter	er the creditor? 2.2 er the creditor? 2.3 er the creditor? 2.4	have more	
trying than o	to collect from you for a debt you come creditor for any of the debts that in Part 1, do not fill out or submit the Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & Bank of America P.O. Box 45224 Jacksonville, FL 32232-522 Name, Number, Street, City, State & BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306 Name, Number, Street, City, State & PCL Dept. P.O. Box 1558 GW4W61 Columbus, OH 43216	wee to someone else, list the creditor in Part t you listed in Part 1, list the additional credit his page. Zip Code 4 Zip Code Zip Code Zip Code	On which line Last 4 digits of	e in Part 1 did you enter	er the creditor? 2.3 er the creditor? 2.4 er the creditor? 2.4	have more	

		Document	Page 20 of	67		
Fill in this info	rmation to identify your c	ase:				
Debtor 1	Steven Bruce Berz	on.				
200101	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS			
Cooo numbor						
Case number (if known)					☐ Check i	f this is an
					amende	
Official For						
3chedule	E/F: Creditors Wi	ho Have Unsecure	d Claims			12/15
any executory co Schedule G: Exec Schedule D: Cred eft. Attach the Co name and case n	ntracts or unexpired leases to cutory Contracts and Unexpir litors Who Have Claims Secu continuation Page to this page umber (if known).	Part 1 for creditors with PRIOR hat could result in a claim. Also red Leases (Official Form 106G) red by Property. If more space is. If you have no information to it.	o list executory contra b. Do not include any c is needed, copy the Pa	acts on Schedule A/B: P creditors with partially s art you need, fill it out, r	roperty (Official Forr ecured claims that a number the entries in	n 106A/B) and on re listed in the boxes on the
	All of Your PRIORITY Uns					
	itors have priority unsecured	claims against you?				
□ No. Go to	Part 2.					
Yes.						
identify what possible, list	type of claim it is. If a claim has the claims in alphabetical order	If a creditor has more than one p both priority and nonpriority amore according to the creditor's name. ticular claim, list the other creditor	unts, list that claim here . If you have more than t	and show both priority a	nd nonpriority amounts	s. As much as
(For an expla	nation of each type of claim, se	ee the instructions for this form in t	the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
2.1 Illinois	s Department of Reven	ue Last 4 digits of acco	ount number	\$1,864.73	\$0.00	\$1,864.73
Priority (Creditor's Name					
_	Sox 19035	When was the debt	incurred?			
	gfield, IL 62794-9035 Street City State Zip Code	As of the date you f	file, the claim is: Check	k all that apply		
	red the debt? Check one.	☐ Contingent	•	,		
■ Debtor 1	I only	☐ Unliquidated				
☐ Debtor 2	only	☐ Disputed				
_	I and Debtor 2 only	Type of PRIORITY u	insecured claim:			
	,					
	one of the debtors and another	<u>_</u>				
	f this claim is for a communi		n other debts you owe the or personal injury while	-		
No	n subject to offset?		or personal injury wrille	you were intoxicated		
■ No □ Yes		Other. Specify	2014 IL 1040			
2.2 Illinois	s Department of Reven	ue Last 4 digits of acco	ount number	\$2,388.54	\$0.00	\$2,388.54
Priority (Creditor's Name					
	ox 19035 gfield, IL 62794-9035	When was the debt	incurred?			
	Street City State Zip Code	As of the date you f	file, the claim is: Check	k all that apply		
Who incur	red the debt? Check one.	☐ Contingent				
■ Debtor 1	I only	☐ Unliquidated				
☐ Debtor 2	-	☐ Disputed				
	I and Debtor 2 only	Type of PRIORITY u	unsecured claim:			
_	one of the debtors and another	П.				
_			•	ho govern t		
	f this claim is for a communi n subject to offset?	<u>_</u>	n other debts you owe the or personal injury while	-		
No	i subject to onset?	Other Specify	or personal injury wrille	you were intoxicated		

☐ Yes

2015 IL 1040

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 21 of 67
Case number (if known)

Debtor 1 Steven Bruce Berzon 2.3 Last 4 digits of account number \$1,948.00 \$0.00 Illinois Department of Revenue \$1,948.00 Priority Creditor's Name P.O. Box 19035 When was the debt incurred? **Springfield, IL 62794-9035** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt $oxedsymbol{\square}$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2016 IL 1040 2.4 **Internal Revenue Service** \$1,219.43 \$0.00 Last 4 digits of account number \$1,219.43 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify 2017, 1040 ☐ Yes 2.5 **Internal Revenue Service** Last 4 digits of account number \$1,319.37 \$0.00 \$1,319.37 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations At least one of the debtors and another ■ Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify

☐ Yes

2015, 1040

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Document

Page 22 of 67
Case number (if known) Debtor 1 Steven Bruce Berzon 2.6 \$0.00 **Internal Revenue Service** Last 4 digits of account number \$14,084.73 \$14,084.73 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2016, 1040 2.7 **Internal Revenue Service** Last 4 digits of account number \$1,337.95 \$1,337.95 \$0.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt ■ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify 2018, 1040 ☐ Yes 2.8 Julie Schwartz Last 4 digits of account number \$0.00 \$0.00 \$0.00 Priority Creditor's Name 1262 North Wellington Court When was the debt incurred? Buffalo Grove, IL 60089 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Domestic support obligations ☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other, Specify ☐ Yes child support payments deducted from paycheck Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Total claim

Entered 12/30/19 19:14:03 Case 19-36550 Doc 1 Filed 12/30/19 Desc Main

Page 23 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.1 \$3,552.48 **Advocate Lutheran General** Last 4 digits of account number 3801 Nonpriority Creditor's Name P.O. Box 4249 When was the debt incurred? Carol Stream, IL 60197-4249 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services for dependent ☐ Yes 4.2 **Advocate Medical Group** Last 4 digits of account number 4779 \$1,364.73 Nonpriority Creditor's Name 29368 Network Place When was the debt incurred? Chicago, IL 60673-1293 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical services for dependent 4.3 **American Express** Last 4 digits of account number 1003 \$11,109.34 Nonpriority Creditor's Name P. O. Box 981535 When was the debt incurred? El Paso, TX 79908-1535 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes

Entered 12/30/19 19:14:03 Case 19-36550 Doc 1 Filed 12/30/19 Desc Main Document

Page 24 of 67 Case number (if known) Debtor 1 Steven Bruce Berzon 4.4 \$1,068.97 American Express Last 4 digits of account number 1009 Nonpriority Creditor's Name P. O. Box 981535 When was the debt incurred? El Paso, TX 79908-1535 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify misc credit card charges ☐ Yes 4.5 **American Express** Last 4 digits of account number 1000 \$1,991.92 Nonpriority Creditor's Name P. O. Box 981535 When was the debt incurred? El Paso, TX 79908-1535 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes misc credit card charges Other. Specify 4.6 **American Express** Last 4 digits of account number 1005 \$1,340.58 Nonpriority Creditor's Name P. O. Box 981535 When was the debt incurred? El Paso, TX 79908-1535 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes

Entered 12/30/19 19:14:03 Case 19-36550 Doc 1 Filed 12/30/19 Desc Main

Page 25 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.7 \$3,007.26 American Express Last 4 digits of account number 1003 Nonpriority Creditor's Name P. O. Box 981535 When was the debt incurred? El Paso, TX 79908-1535 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify misc credit card charges ☐ Yes 4.8 Arlington Ridge Pathology SC Last 4 digits of account number 662G \$161.00 Nonpriority Creditor's Name 520 East 22nd Street When was the debt incurred? Lombard, IL 60148 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes medical services for dependent 4.9 **Bank of America** Last 4 digits of account number \$4,849.95 2473 Nonpriority Creditor's Name P.O. Box 851001 When was the debt incurred? Dallas, TX 75285-1001 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans

■ No

☐ Yes

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify misc credit card charges

☐ Check if this claim is for a community

Is the claim subject to offset?

Page 26 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.1 **Bank of America** 6156 \$11,240.56 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 851001 When was the debt incurred? Dallas, TX 75285-1001 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.1 **Bank of America** 7281 \$2,062.38 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 851001 Dallas, TX 75285-1001 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify misc credit card charges ☐ Yes 4.1 **Bank of America** \$15.199.14 5763 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 851001 When was the debt incurred? Dallas, TX 75285-1001 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify misc credit card charges

Is the claim subject to offset?

Entered 12/30/19 19:14:03 Case 19-36550 Doc 1 Filed 12/30/19 Desc Main Document

Page 27 of 67 Case number (if known) Debtor 1 Steven Bruce Berzon 4.1 **Barclays** 7483 \$1,082.64 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 60517 When was the debt incurred? City of Industry, CA 91716-0517 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.1 Cathay Pacific/Syncb 7987 \$9,251.54 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 530939 Atlanta, GA 30353-0939 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.1 1038 \$8.079.57 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Page 28 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.1 Citi 9568 \$11,926.35 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.1 Citi 5565 \$1,649.60 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6500 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.1 7524 \$11.620.92 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 6500 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Page 29 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.1 Citibank, N.A. 1959 \$6,395.58 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 790110 When was the debt incurred? Saint Louis, MO 63179-0110 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify personal loan 4.2 Discover 5466 \$2,509.50 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6103 Carol Stream, IL 60197-6103 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.2 Discover \$434.62 5777 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 6103 When was the debt incurred? Carol Stream, IL 60197-6103 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Page 30 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.2 **Discover Student Loans** 8183 \$34,985.52 Last 4 digits of account number 2 Nonpriority Creditor's Name P.O. Box 6107 When was the debt incurred? Carol Stream, IL 60197-6107 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify student loan 4.2 Fifth Third Bank 6466 \$12,559.71 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 740789 Cincinnati, OH 45274-0789 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify misc credit card charges ☐ Yes 4.2 Fifth Third Bank 8272 \$2,438,15 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 740789 When was the debt incurred? Cincinnati, OH 45274-0789 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Entered 12/30/19 19:14:03 Case 19-36550 Doc 1 Filed 12/30/19 Desc Main

Page 31 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon 4.2 **Huntington National Bank** 6536 \$10,188.12 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 182387 When was the debt incurred? Columbus, OH 43218-2387 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify misc credit card charges ☐ Yes 4.2 Nordstrom FSB 4942 \$4,293.97 Last 4 digits of account number 6 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6555 Englewood, CO 80155 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify misc credit card charges ☐ Yes **Northshore University Health** 4.2 2504 \$242.21 System Last 4 digits of account number Nonpriority Creditor's Name c/o Americollect When was the debt incurred? P.O. Box 1505 Manitowoc, WI 54221-1505 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services for dependent

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 32 of 67

Debtor	1 Steven Bruce Berzon		Case number (if known)		
4.2	Northshore University Health System Nonpriority Creditor's Name c/o Americollect	Last 4 digits of account number	6317	\$1,077.79	
	P.O. Box 1505 Manitowoc, WI 54221-1505 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin	•		
	Yes	Other. Specify medical ser	rvices for dependent		
4.2	NorthShore University Health System	Last 4 digits of account number	8920,6446,8 827,7628,91 38,	\$1,320.00	
	Nonpriority Creditor's Name c/o Pinnacle Management Services 830 Roundabout, Suite B Dundee, IL 60118	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa			
	No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts		
		·	•		
	☐ Yes	Other. Specify medical ser	rvices for dependent		
4.3	PayPal Credit/Syncb	Last 4 digits of account number	8385	\$6,355.41	
	Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896-5005	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		

☐ Yes

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 33 of 67

Danibalia Managana Dagana		
Receivables Management Partners,	Last 4 digits of account number 0498	\$1,402.39
Nonpriority Creditor's Name 2250 East Devon Avenue Suite 245	When was the debt incurred?	
Des Plaines, IL 60018-4521 Number Street City State Zip Code Who incurred the debt? Check one	As of the date you file, the claim is: Check all that apply	
_	O continuent	
•	_	
_	•	
_	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical services for dependent	
Sallie Mae	Last 4 digits of account number 6982	\$22,172.34
Nonpriority Creditor's Name P.O. Box 8377 Philodolphia PA 10101 9377	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify student loan	
Sam's Club MC/Syncb	Last 4 digits of account number 4672	\$9,765.40
Nonpriority Creditor's Name P.O. Box 960013 Orlando, El. 33896,0013	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify misc credit card charges	
	LL Nonpriority Creditor's Name 2250 East Devon Avenue Suite 245 Des Plaines, IL 60018-4521 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes Sallie Mae Nonpriority Creditor's Name P.O. Box 8377 Philadelphia, PA 19101-8377 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes Sam's Club MC/Syncb Nonpriority Creditor's Name P.O. Box 960013 Orlando, FL 32896-0013 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 3 and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	When was the debt incurred?

Deb	tor 1 Steven Bruce Berzon	Case number (if known)				
4.3 4	Synchrony Bank	Last 4 digits of account number 7815	\$2,110.38			
	Nonpriority Creditor's Name P.O. Box 960061	When was the debt incurred?	·			
	Orlando, FL 32896-0061 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify misc credit card charges				
4.3 5	Synchrony Bank/Amazon	Last 4 digits of account number 0069	\$1,390.90			
	Nonpriority Creditor's Name P.O. Box 960013 Orlando, FL 32896-0013	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	П				
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify misc credit card charges				
4.3 6	U.S. Bank	Last 4 digits of account number 8946	\$18,764.38			
	Nonpriority Creditor's Name P.O. Box 790408	When was the debt incurred?	·			
	Saint Louis, MO 63179-0408	- As All a late of the districts Of the late of				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_					
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	S and another				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify misc credit card charges				
		opcon,				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 35 of 67 Case number (if known) Document Debtor 1 Steven Bruce Berzon **Advocate Medical Group** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8550 West Bryn Mawr Avenue Part 2: Creditors with Nonpriority Unsecured Claims 8th Floor Chicago, IL 60631 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **American Express** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 0001 ■ Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims American Express Line 4.4 of (Check one): Box 0001 Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **American Express** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 0001 ■ Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **American Express** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 0001 ■ Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **American Express** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 0001 Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Americollect Line 4.27 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1690 Part 2: Creditors with Nonpriority Unsecured Claims Manitowoc, WI 54221-1690 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Americollect Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1690 Part 2: Creditors with Nonpriority Unsecured Claims Manitowoc, WI 54221-1690 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bank of America** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982234 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-2234 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bank of America** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982234 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-2234 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Bank of America Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982234 Part 2: Creditors with Nonpriority Unsecured Claims El Paso, TX 79998-2234 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Bank of America** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 982234

El Paso, TX 79998-2234

Part 2: Creditors with Nonpriority Unsecured Claims

Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Case 19-36550 Doc 1

Page 36 of 67 Case number (if known) Document

Debtor 1 Steven Bruce Berzon		Case number (if known)	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?	
Card Services	Line 4.13 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 8802		Part 2: Creditors with Nonpriority Unsecured Claims	
Wilmington, DE 19899-8802	Last 4 digits of account number	and a contained with rediptionly checoaled claims	
Name and Address	On which entry in Part 1 or Part 2 did	t you list the original creditor?	
Citi Cards	Line 4.15 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 78045	or (ensureme)	Part 2: Creditors with Nonpriority Unsecured Claims	
Phoenix, AZ 85062-8045	Look 4 digite of account number	Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	· ·	
Citi Cards	Line 4.16 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 78045 Phoenix, AZ 85062-8045		Part 2: Creditors with Nonpriority Unsecured Claims	
Fildellix, A2 03002-0043	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Citi Cards	Line 4.17 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 78045		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Phoenix, AZ 85062-8045	Last 4 digits of account number		
Name and Address	_	A very licate the existence of examined and the control of the second se	_
Name and Address Citi Cards	On which entry in Part 1 or Part 2 did Line 4.18 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 78045	Line 4.10 of (Check one):	·	
Phoenix, AZ 85062-8045		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?	
Citibank	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 769004		■ Part 2: Creditors with Nonpriority Unsecured Claims	
San Antonio, TX 78245-9004	Last 4 digits of account number	, ,	
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?	
Discover	Line 4.20 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
P. O. Box 30943		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Salt Lake City, UT 84130		- Fait 2. Creditors with Nonpholity offsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did		
Discover	Line 4.21 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
P. O. Box 30943		Part 2: Creditors with Nonpriority Unsecured Claims	
Salt Lake City, UT 84130	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?	
Fifth Third Bank	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
5050 Kingsley Drive		Part 2: Creditors with Nonpriority Unsecured Claims	
Cincinnati, OH 45227	Last 4 digits of account number	— Tart 2. Orealto's with Northholity of secured Gains	
Name and Address	On which entry in Part 1 or Part 2 did	· •	
Fifth Third Bank 5050 Kingsley Drive	Line 4.24 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Cincinnati, OH 45227		■ Part 2: Creditors with Nonpriority Unsecured Claims	
omonium, on tolli	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?	
GC Services Limited Partnership	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims	
P.O. Box 79		☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Elgin, IL 60121	Last 4 digits of account number	2.2.2.2.2.2	
	-		
Name and Address Huntington National Bank	On which entry in Part 1 or Part 2 did	d you list the original creditor?	

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 37 of 67

Debtor 1 Steven Bruce Berzon		Case number (if known)
Customer Service P.O. Box 1558 Columbus, OH 43272	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Huntington National Bank 295 Huntington Drive OPC 829	On which entry in Part 1 or Part 2 di Line 4.25 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Akron, OH 44307	Last 4 digits of account number	
Name and Address Nordstrom	On which entry in Part 1 or Part 2 di Line 4.26 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
P.O. Box 13589 Scottsdale, AZ 85267	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 di	
Payment Center Professional Services 23056 Network Place Chicago, IL 60673-1230	Line <u>4.29</u> of (<i>Check one):</i>	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address PayPal Credit/Syncb P.O. Box 960006 Orlando El 32896.0006	On which entry in Part 1 or Part 2 di Line 4.30 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896-0006	Last 4 digits of account number	
Name and Address Sallie Mae P.O. Box 3319	On which entry in Part 1 or Part 2 di Line 4.32 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington, DE 19804-4319	Last 4 digits of account number	
Name and Address Synchrony Bank Attn: Bankruptcy Dept. P.O. Box 965064	On which entry in Part 1 or Part 2 di Line 4.14 of (<i>Check one):</i>	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, FL 32896-5064	Last 4 digits of account number	
Name and Address Synchrony Bank Attn: Bankruptcy Dept. P.O. Box 965064 Orlando, FL 32896-5064	On which entry in Part 1 or Part 2 di Line 4.34 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address U.S. Bank P.O. Box 6335 Fargo, ND 58125-6335	On which entry in Part 1 or Part 2 di Line <u>4.36</u> of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type o 6. Total the amounts of certain types of unsecured type of unsecured claim.		ical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
Total claims from Part 1 6b. Taxes and certain other of	ions	6a. \$ 0.00

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims				-	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	24,162.75
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00

Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Case 19-36550 Page 38 of 67 Case number (if known) Document

Debtor 1 Steven Bruce Berzon

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 24,162.75
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
otal aims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 238,965.30
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 238,965.30

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main

		1700.11110.	111 FAUE 33 OF 07	
Fill in this infor	mation to identify your	case:		
Debtor 1	Steven Bruce Be	rzon		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Camden South End 1205 South Tryon Street Charlotte, NC 28203	short-term lease of 1209 South College Street, #2333, Charlotte, NC 28203, 1/17/20-5/31/20
2.2	Cort Furniture Rental 15000 Conference Center Drive Suite 440 Chantilly, VA 20151	short-term furniture rental, 1/17/20-7/31/20

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main

	Docume	nt Page 40 of 67	
is information to identify y			
Steven Bruce	Berzon		
First Name	Middle Name	Last Name	_
filing) First Name	Middle Name	Last Name	
tates Bankruptcy Court for t	he: NORTHERN DISTRICT	OF ILLINOIS	
			_
mber			— 0. 1.74.
			Check if this is an
			amended filing
al Form 106H			
	l - l-4		
aule H: Your C	odeptors		12/15
re filing together, both are and number the entries in ne and case number (if kno	equally responsible for supp the boxes on the left. Attach own). Answer every question.	lying correct information. If more spa the Additional Page to this page. On	ice is needed, copy the Additional Page,
	3 ,		
es			
ona, California, Idaho, Louis o. Go to line 3.	iana, Nevada, New Mexico, Pue	erto Rico, Texas, Washington, and Wisc	
ne 2 again as a codebtor o n 106D), Schedule E/F (Of	nly if that person is a guarant	or or cosigner. Make sure you have I	isted the creditor on Schedule D (Official
			The creditor to whom you owe the debt chedules that apply:
		Shook dii s	
Andre Drenne			
			le E/F, line
San Diego, CA 92101			
<u>.</u>		Same Mae	•
Julie Schwartz		☐ Schedu	le D, line
1262 North Wellington	n Court		le E/F, line 4.2
Buffalo Grove, IL 6008	39		
			Medical Group
Julie Schwartz		☐ Schedu	le D, line
			le E/F, line 4.1
Buffalo Grove, IL 6008	39		
			Lutheran General
	Steven Bruce First Name states Bankruptcy Court for to tember al Form 106H dule H: Your C rs are people or entities were filing together, both are and number the entries in the end case number (if known to you have any codebtors to ese. Stithin the last 8 years, have ona, California, Idaho, Louis to. Go to line 3. es. Did your spouse, former column 1, list all of your cone 2 again as a codebtor on 106D), Schedule E/F (Off Column 2. Column 1: Your codebtor Name, Number, Street, City, State Arden Berzon 1330 Market Street Apt. 122 San Diego, CA 92101 Julie Schwartz 1262 North Wellingtor Buffalo Grove, IL 6008	Steven Bruce Berzon First Name Middle Name All Form 106H Call Form 106E/F), or Schedule E/F (Official Form 106E/F), or Schedule Column 1. Isist all of your codebtors. Do not include your not 2 again as a codebtor only if that person is a guarant in 106D), Schedule E/F (Official Form 106E/F), or Schedule Column 2. Call Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Arden Berzon 1330 Market Street Apt. 122 San Diego, CA 92101 Julie Schwartz 1262 North Wellington Court Buffalo Grove, IL 60089	Steven Bruce Berzon First Name Middle Name Last Name Audide Name Last Name NORTHERN DISTRICT OF ILLINOIS The stream North Hern Stream North Hern District OF ILLINOIS The stream North Hern Stream North Hern District OF ILLINOIS The stream North Hern District OF ILLINOIS The stream North Hern Stream North Hern District OF ILLINOIS The stream North Hern District OF ILLINOIS The stream North Hern District OF ILLINOIS The stream North Hern Stream North Hern District OF ILLINOIS The stream North Hern North Hern District OF ILLINOIS The stream North Hern Stream North Hern District OF ILLINOIS The stream North Hern North Hern District OF ILLINOIS The stream North Hern North Hern District OF ILLINOIS The stream North Hern District OF ILLINOIS The stream North Hern District OF ILLINOIS The stream North Hern North Hern District OF ILLINOIS The stream North Hern North Hern District OF ILLINOIS The stream North Hern No

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 41 of 67

						-				
	in this information to identify your cotor 1 Steven Brue									
Dei	otor 1 Steven Bruc	e Berzon			_					
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 		-			□ A	k if this is: n amende	d filing	a postr	petition chapter
_						1	3 income	as of the fo	ollowing	date:
0	fficial Form 106I					N	IM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing wi	ith you, do not include	inforr	mati	on about	your spo	ouse. If mo	ore spa	ace is needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling sp	ouse
	If you have more than one job,	Employment status	■ Employed				☐ Emple	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	PMO Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Allstate Insurance	e Com	npar	ny				
	Occupation may include student or homemaker, if it applies.	Employer's address	2775 Sanders Ro Northbrook, IL 60							
		How long employed t	here? 37 yrs							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for	any	line, write	\$0 in the	space. Inc	clude yo	our non-filing
	u or your non-filing spouse have mo		ombine the information	for all e	emplo	oyers for	that perso	n on the li	nes bel	low. If you need
						For Del	otor 1	For Del non-fili		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	12	,541.25	\$		N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A

12,541.25

N/A

Calculate gross Income. Add line 2 + line 3.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 42 of 67

Copy line 4 here 4, \$ 12,541.25 \$ N/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund ioans 5d. Sa85a8 N/A 5	Debt	or 1	Steven Bruce Berzon	_	Case	number (if known)			
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Sp. 5c. Sp. 5c. Sp. 5c. Sp. 165 Sp. N/A 5c. Note of the special support obligations 5c. Insurance 5c. Sp. 5c. Sp. 5c. Sp. 165 Sp. N/A 5c. Insurance 5c. Sp. 165 Sp. N/A 5c. Other deductions. Specify: term life insurance 5c. Sp. 165 Sp. N/A 5c. Other deductions. Specify: term life insurance 5c. Sp. 165 Sp. N/A 5c. Other deductions. Add lines 5a+5b+5c+5d+5c+5f+5g+5h, 5c. Sp. 165 Sp. N/A 6c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5c+5f+5g+5h, 6c. Sp. 16857,08 Sp. N/A 6c. Calculate total monthly take-home pay. Subtract line 6 from line 4. 6c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5c+5f+5g+5h, 6c. Sp. 16857,08 Sp. N/A 6c. List all other income regularly received: 6c. Sp. 16857,08 Sp. N/A 6c. Sp. 168		Con	vy line 4 hore	4			non-	filing spouse	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Social Spise Sp		Cop	y line 4 nere	4.	Φ_	12,541.25	Φ	N/A	
55. Mandatory contributions for retirement plans 55. \$0.00 \$ N/A	5.		• •						
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5g. Union dues 5h. Other deductions. Specify: term life insurance 5h. \$168.07 + \$ NVA charity garnishment fee 5h. \$168.07 + \$ NVA \$121.67 \$ NVA FO buy back 5 94.58 \$ NVA 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$6,857.08 \$ NVA 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$5,684.17 \$ NVA 8. List all other income regularly receives 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly retincome. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony. spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. Unemployment compensation 8c. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as slood stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$0.00 \$ NVA 8g. Pension or retirement income 8h. Other government income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify: 8f. \$0.00 \$ NVA 8h. Other monthly income. Specify									
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FTO buty back Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. Add the payroll deductions. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. Add the payroll deductions. Add lines 7a + line 9. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Wire that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		011.					· · · · · · · · · · · · · · · · · · ·		
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 6,857.08 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 5,684.17 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other					. —		\$		
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8. List all other income regularly received: 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	6,857.08	\$	N/A	
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 9h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 11. \$ 5,684.17 + \$ N/A = \$ 5,684.17 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. \$ 5,684.17 Combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.	7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	5,684.17	\$	N/A	
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	8a.	\$	0.00	\$	N/A	
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4dd the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No.		8b.							
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		8d.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_	0.00	\$	N/A	
8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00			Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)	· <u>—</u>		` <u></u>		
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form?		8g.	· · · · · <u></u>		٠				
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.		8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.	10.		•	10. \$		5,684.17 + \$_		N/A = \$	5,684.17
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 5,684.17 Combined monthly income No.	11.	Incluothe Other	ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depen		•			0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No.	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certain						•
_ ·	13.	Do :	•	?					
☐ Yes. Explain: │			Yes. Explain:						

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 43 of 67

Fill	in this informa	tion to identify yo	our case:			l			
	otor 1	Steven Bruc				Ch	eck if th	is is:	
		Oteven Bruce	e Deizoii					nended filing	
	otor 2 ouse, if filing)								ring postpetition chapter the following date:
(Opt	ouse, ii iiiiig)							periodo ao or t	tollowing date.
Unit	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	IOIS		MM /	DD / YYYY	
	e number								
(If k	nown)								
Of	fficial Fo	rm 106J							
		J: Your l	Exper	ses					12/1
Be info	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people a ch another sheet to this					
Par 1.	t 1: Descr	ibe Your House nt case?	hold						
	No. Go to								
			in a separ	ate household?					
	□ No	0							
	☐ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		De ag	ependent's je	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.			Spouse				Yes
					Son		10	6	□ No ■ Yes
									■ Yes □ No
					Son		2	3	■ Yes
									□ No
_	_		_						☐ Yes
3.	expenses of	enses include f people other tl d your depende	han 🕳	No Yes					
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a sup					
the	lude expense value of such ficial Form 10	n assistance and	non-cash o	government assistance cluded it on Schedule I:	if you know Yo <i>ur Incom</i> e			Your expe	enses
4.		or home owners		ses for your residence.	Include first mortgag	e 4.	\$		2,801.76
	If not includ	,	- 9.00110						
							_		
		estate taxes	o or root	'a inqurance		4a.	· —		0.00
	•	rty, homeowner's maintenance, re		s insurance ipkeep expenses		4b. 4c.			0.00 303.00
		owner's associat	•			4d.	· —		50.00
5.	Additional n	nortgage payme	ents for vo	our residence, such as ho	me equity loans		\$		104.00

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 44 of 67

 Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6b 	¢	
6a. Electricity, heat, natural gas 6a	c	
6b. Water, sewer, garbage collection	. Ф	250.00
, oono, ganaago oonoono.	. \$	75.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6c	. \$	500.00
6d. Other. Specify: 6c	. \$	0.00
' '	. \$	750.00
Childcare and children's education costs	·	200.00
	. \$	200.00
Personal care products and services	· · · · · · · · · · · · · · · · · · ·	50.00
. Medical and dental expenses		400.00
Transportation. Include gas, maintenance, bus or train fare.	. •	400.00
Do not include car payments.	. \$	400.00
. Entertainment, clubs, recreation, newspapers, magazines, and books 13	. \$	0.00
Charitable contributions and religious donations 14	. \$	0.00
. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance 15a	. \$	0.00
15b. Health insurance 15b	. \$	0.00
15c. Vehicle insurance 15c	. \$	250.00
15d. Other insurance. Specify: 15d	. \$	0.00
. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
· · ·	. \$	0.00
. Installment or lease payments:		
• •	. \$	147.38
1 /	. \$	1,300.36
17c. Other. Specify: Car payment 17c	· -	161.19
, ,	. \$	105.36
Your payments of alimony, maintenance, and support that you did not report as	¢	0.00
adducted from your pay on mile of confedence if your moonie (official your	. \$ \$	
Other payments you make to support others who do not live with you.	· .	0.00
Specify: 19 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: 19		
	. \$	0.00
	. \$. \$	0.00
	. \$. \$	0.00
·	. \$. \$	0.00
	. \$. \$	
	· <u> </u>	0.00
. Other: Specify: 21	. +\$	0.00
. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	8,048.05
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	8,048.05
Calculate your monthly net income.		1
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a	. \$	5,684.17
	\$	8,048.05
23c. Subtract your monthly expenses from your monthly income.	· ·	-2,363.88
The result is your monthly net income. 230	. \$	-2,303.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor may be permanently relocating to Charleston, NC for his employer. This move may have an impact on expenses.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 45 of 67

Fill in this infor	mation to identify your	case:			
Debtor 1	Steven Bruce Bei	rzon			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Form		ın Individual	Debtor's Scl	hedules	12/15
obtaining mone years, or both. 1		n connection with a ban			nent, concealing property, or , or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	alty of perjury, I declare te true and correct.	that I have read the sun	nmary and schedules filed	with this declaration	and
X /s/ Ste	ven Bruce Berzon		X		
Stever	n Bruce Berzon		Signature of D	Debtor 2	

Date

Signature of Debtor 1

Date **December 27, 2019**

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 46 of 67

Fill	in this inform	nation to identify you	r case:			
Del	otor 1	Steven Bruce Be	Middle Name	Last Name		
Del	otor 2	. not riamo	inidale ridine	Zastrianie		
(Spc	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Cas	se number					
(if kr	nown)					Check if this is an
						mended filing
<u>Of</u>	ficial For	<u>m 107</u>				
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
					equally responsible for sup	
		ore space is needed,). Answer every que		this form. On the top of any	additional pages, write you	ur name and case
	<u> </u>	,				
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	is?			
	Married					
	□ Not mari	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	_		•	•		
	■ No	all of the places you l	ived in the loot 2 years. Do no	at include where you live now		
	LI Yes. Lisi	all of the places you i	ived in the last 3 years. Do no	of include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
_						
3. state					ity property state or territor co, Texas, Washington and V	
	_	•	, , ,	,	, ,	,
	■ No	les soms over fill and Cal	andula III Varia Cadabtana (Cl	#:-:-! F 40CU\		
	☐ Yes. Ma	ke sure you fill out Sci	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
4.			nployment or from operatin u received from all jobs and a		ear or the two previous cale time activities.	ndar years?
			have income that you receive			
	□ No					
	_	in the details.				
			Dalifar 4		Dalita a 0	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		of current year until	■ Wages, commissions,	\$190,616.53	☐ Wages, commissions,	
the	date you filed	d for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 47 of 67
Case number (if known) Document

Debtor 1 Steven Bruce Berzon

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2018)	■ Wages, commissions, bonuses, tips			
				☐ Operating a business		☐ Operating a business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$143,768.00	☐ Wages, commissions, bonuses, tips	
				☐ Operating a business		☐ Operating a business	
	winnings. List each s	If you are fil	ing a joint cas	pensions, rental income, interse and you have income that young from each source separate	you received together, list it o	•	a gambiing and louely
				Dahtan 4		Dahtan 0	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	or the calendanuary 1 to			IRA Distributions	\$37,650.00		
Pa 6.	!	Debtor 1's	or Debtor 2 ebtor 1 nor I	Made Before You Filed for a second of the se	r debts? umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an
			,	ore you filed for bankruptcy, di	d you pay any creditor a tota	I of \$6,825* or more?	
		□ No.	Go to line 7	'.			
		☐ Yes	paid that cr not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support oblig his bankruptcy case.	n one or more payments and t ations, such as child support a or after the date of adjustment	and alimony. Also, do
	Yes.			or both have primarily consu		I of \$600 or more?	
		□ _{No.}	Go to line 7	,			
		■ Yes	List below of include pay	each creditor to whom you pai		I the total amount you paid tha port and alimony. Also, do not	

Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Case 19-36550 Page 48 of 67
Case number (if known) Document

Debtor 1 Steven Bruce Berzon

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Wells Fargo Home Mortgage PO Box 6423 Carol Stream, IL 60197	10/18, 11/12, 12/15	\$7,664.56	\$283,004.28	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
BMW Bank of North America P.O. Box 78066 Phoenix, AZ 85062-8066	10/19, 11/19	\$2,600.72	\$58,919.27	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
American Express P. O. Box 981535 El Paso, TX 79908-1535	10/9, 11/13, 12/14 (account ending 41005)	\$957.87	\$1,340.58	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
American Express P. O. Box 981535 El Paso, TX 79908-1535	10/20, 11/14 (account ending 11003)	\$674.43	\$11,609.34	☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
American Express P. O. Box 981535 El Paso, TX 79908-1535	10/6, 10/29, 11/8, 12/7 (account ending 01003)	\$2,977.33	\$3,007.26	☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Citi P.O. Box 6500 Sioux Falls, SD 57117	10/31 (account ending 1038)	\$772.00	\$8,079.57	☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Citi P.O. Box 6500 Sioux Falls, SD 57117	10/13, 11/13 (account ending 7524)	\$649.66	\$11,620.92	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main

Page 49 of 67
Case number (if known) Document Debtor 1 Steven Bruce Berzon

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Citibank, N.A. P.O. Box 790110 Saint Louis, MO 63179-0110	10/5, 11/5 (personal loan)	\$693.20	\$6,395.58	 ☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
	U.S. Bank P.O. Box 790408 Saint Louis, MO 63179-0408	10/30, 11/1 (account ending 8946)	\$1,235.00	\$18,764.38	☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Bank of America P.O. Box 851001 Dallas, TX 75285-1001	10/24 (account ending 6156)	\$681.00	\$11,240.56	 ☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general p of which you are an officer, director, person is a business you operate as a sole proprietor. alimony. No Yes. List all payments to an insider.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and a	u are a general partner; corporations ny managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	ons, and Foreclosures	·		
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case

7.

8.

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Document

Page 50 of 67
Case number (if known) Debtor 1 Steven Bruce Berzon 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Amount Date action was 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates vou more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details.

Email or website address

Person Who Was Paid

Person Who Made the Payment, if Not You

transferred

Date payment

made

or transfer was

Address

Description and value of any property

Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Case 19-36550 Page 51 of 67
Case number (if known) Document

Debtor 1 Steven Bruce Berzon

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment
	Joel A. Schechter 53 W. Jackson Blvd. Suite 1522 Chicago, IL 60604	\$2,335 (includes filing fee)	December 18, 2019	\$2,335.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list	or to make payments to your creditor		ty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any prop transferred	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your businclude both outright transfers and transfers made include gifts and transfers that you have already li	ness or financial affairs? as security (such as the granting of a s		
	Yes. Fill in the details.		D "	D
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection		elf-settled trust or similar device o	of which you are a
	Yes. Fill in the details.			
	Name of trust	Description and value of the prop	erty transferred	Date Transfer was made
Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit Boxes, and Sto	rage Units	
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	•	, ,	, ,
	Include checking, savings, money market, or on the houses, pension funds, cooperatives, associated. No			unions, brokerage
	Yes. Fill in the details.			
		ast 4 digits of Type of account count number instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for bankruptcy, any	safe deposit box or other deposi	tory for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Page 52 of 67 Document ase number (*if known*) Debtor 1 Steven Bruce Berzon 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Do you still Who else has or had access Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Value Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Date of notice Name of site Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City,

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

State and ZIP Code)

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Page 53 of 67 Document Case number (if known) Debtor 1 Steven Bruce Berzon ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Steven Bruce Berzon Signature of Debtor 2 Signature of Debtor 1 Date December 27, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 54 of 67

	rmation to identify your				
Debtor 1	Steven Bruce Be	rzon			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	-	
United States Ba	nited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS				
Case number					
(if known)					Check if this is an amended filing
Official Fo		n for Indiv	iduals Filing Under Cha	pter 7	12/15
	dividual filing under cha	-	out this form if:		
_	ve claims secured by yo sed personal property a		at avminad		
You must file th	is form with the court w ever is earlier, unless th	vithin 30 days after	you file your bankruptcy petition or by the da e time for cause. You must also send copies		
	eople are filing togethe nd date the form.	r in a joint case, bo	th are equally responsible for supplying corr	ect information	n. Both debtors must
	and accurate as possik your name and case nu		needed, attach a separate sheet to this form	. On the top o	of any additional pages,
Part 1: List Y	our Creditors Who Hav				
		e Secured Claims			
			: Creditors Who Have Claims Secured by Pro	perty (Officia	I Form 106D), fill in the
information b Identify the c		art 1 of Schedule D	: Creditors Who Have Claims Secured by Pro What do you intend to do with the property secures a debt?	that Di	I Form 106D), fill in the d you claim the property exempt on Schedule C?
	elow.	art 1 of Schedule D	What do you intend to do with the property	that Di	d you claim the property
Identify the c	elow.	art 1 of Schedule D	What do you intend to do with the property	that Di	d you claim the property
Identify the c	elow. reditor and the property t	art 1 of Schedule D	What do you intend to do with the property secures a debt?	y that Di as	d you claim the property exempt on Schedule C?
Creditor's Iname:	elow. reditor and the property t	art 1 of Schedule Da	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	y that Di as	d you claim the property exempt on Schedule C?
Creditor's Iname:	elow. reditor and the property t Bank of America	art 1 of Schedule Da	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	y that Di as	d you claim the property exempt on Schedule C?
Creditor's I name:	Bank of America	art 1 of Schedule Da	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	y that Di as	d you claim the property exempt on Schedule C?
Creditor's Iname: Description or property securing debt	Bank of America	art 1 of Schedule Da	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	that Di as	d you claim the property exempt on Schedule C? No Yes
Creditor's Iname: Description or property securing debt	Below. reditor and the property to the proper	art 1 of Schedule Da	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	that Di as	d you claim the property exempt on Schedule C?
Creditor's name: Description or property securing debta	Below. reditor and the property to the proper	art 1 of Schedule D	What do you intend to do with the property secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	that Di as	d you claim the property exempt on Schedule C? No Yes

Official Form 108

property

Creditor's

name:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

 \square Retain the property and [explain]:

Description of 2017 BMW X5

BMW Bank of North America

■ No

☐ Yes

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 55 of 67

Debtor 1	Steven Bruce Berzon	Case number (if known)	
securing	debt:		_
Creditor's	Huntington National Bank	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Descripti property securing	Lindenhurst, IL 60046	 □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: Continuing making monthly payments 	■ Yes
Creditor's	NPRTO Illinois, LLC	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Descripti property securing	on of lease purchase of mattress	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	□ Yes
Creditor's	S Wells Fargo Home Mortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Descripti property securing	Lindenhurst, IL 60046	 Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Continue making monthly payments 	■ Yes
For any une in the inform	nation below. Do not list real estate lease	isted in Schedule G: Executory Contracts and Unexpire is. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe y	our unexpired personal property leases		Will the lease be assumed?
Lessor's na	me: Camden South End		□ No ■ Yes
Description Property:	of leased short-term lease of 1209 S 1/17/20-5/31/20	South College Street, #2333, Charlotte, NC 28203,	00
Lessor's na	me: Cort Furniture Rental		□ No
			Yes
Description Property:	of leased short-term furniture rental	, 1/17/20-7/31/20	
Part 3: S	ign Below		
	lty of perjury, I declare that I have indicat at is subject to an unexpired lease.	ed my intention about any property of my estate that se	cures a debt and any personal
	even Bruce Berzon en Bruce Berzon	X Signature of Debtor 2	
Signat	ure of Debtor 1	-	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 56 of 67

Debtor 1	r 1 Steven Bruce Berzon		Case number (if known)	
Date	December 27, 2019	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-36550 Doc 1 Filed 12/30/19 Entered 12/30/19 19:14:03 Desc Main Document Page 61 of 67

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Steven Bruce Berzon		Case N	0.	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be p	aid to me, for services r	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	2,000.00	
	Balance Due		\$	2,000.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are m	embers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name				law firm. A
6.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankrupto	y case, including:	
1	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, states c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ment of affairs and plan which rs and confirmation hearing, and educe to market value; exc as as needed; preparation	n may be required; and any adjourned; emption planni	nearings thereof;	filing of
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			nces, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for	or representation of the	debtor(s) in
D	December 27, 2019	/s/ Joel A. Schec	hter		
D	Date (Joel A. Schechte Signature of Attorne			
		Law Offices of Jo		r	
		53 West Jackson	Blvd		
		Suite 1522 Chicago, IL 6060	4		
		312-332-0267 Fa	x: 312-939-471	ļ	
		joelschechter195	3@gmail.com		
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Steven Bruce Berzon		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	53
	The above-named Debtor(s) I (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	December 27, 2019	/s/ Steven Bruce Berzon Steven Bruce Berzon Signature of Debtor		

Advocate Lutheran General P.O. Box 4249 Carol Stream, IL 60197-4249

Advocate Medical Group 29368 Network Place Chicago, IL 60673-1293

Advocate Medical Group 8550 West Bryn Mawr Avenue 8th Floor Chicago, IL 60631

American Express
P. O. Box 981535
El Paso, TX 79908-1535

American Express Box 0001 Los Angeles, CA 90096-8000

Americollect P.O. Box 1690 Manitowoc, WI 54221-1690

Arden Berzon 1330 Market Street Apt. 122 San Diego, CA 92101

Arlington Ridge Pathology SC 520 East 22nd Street Lombard, IL 60148

Bank of America P.O. Box 15220 Wilmington, DE 19886-5220

Bank of America P.O. Box 851001 Dallas, TX 75285-1001

Bank of America P.O. Box 45224 Jacksonville, FL 32232-5224 Bank of America P.O. Box 982234 El Paso, TX 79998-2234

Barclays P.O. Box 60517 City of Industry, CA 91716-0517

BMW Bank of North America P.O. Box 78066 Phoenix, AZ 85062-8066

BMW Financial Services Regional Service Center P.O. Box 3608 Dublin, OH 43016-0306

Card Services P.O. Box 8802 Wilmington, DE 19899-8802

Cathay Pacific/Syncb P.O. Box 530939 Atlanta, GA 30353-0939

Citi P.O. Box 6500 Sioux Falls, SD 57117

Citi Cards P.O. Box 78045 Phoenix, AZ 85062-8045

Citibank P.O. Box 769004 San Antonio, TX 78245-9004

Citibank, N.A. P.O. Box 790110 Saint Louis, MO 63179-0110

Discover P.O. Box 6103 Carol Stream, IL 60197-6103 Discover P. O. Box 30943 Salt Lake City, UT 84130

Discover Student Loans P.O. Box 6107 Carol Stream, IL 60197-6107

Fifth Third Bank
P.O. Box 740789
Cincinnati, OH 45274-0789

Fifth Third Bank 5050 Kingsley Drive Cincinnati, OH 45227

GC Services Limited Partnership P.O. Box 79 Elgin, IL 60121

Huntington National Bank P.O. Box 182387 Columbus, OH 43218-2387

Huntington National Bank Customer Service P.O. Box 1558 Columbus, OH 43272

Huntington National Bank 295 Huntington Drive OPC 829 Akron, OH 44307

Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794-9035

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Julie Schwartz 1262 North Wellington Court Buffalo Grove, IL 60089 Nordstrom P.O. Box 13589 Scottsdale, AZ 85267

Nordstrom FSB P.O. Box 6555 Englewood, CO 80155

Northshore University Health System c/o Americollect P.O. Box 1505 Manitowoc, WI 54221-1505

NorthShore University Health System c/o Pinnacle Management Services 830 Roundabout, Suite B Dundee, IL 60118

NPRTO Illinois, LLC 256 West Data Dr. Draper, UT 84020

Payment Center Professional Services 23056 Network Place Chicago, IL 60673-1230

PayPal Credit/Syncb P.O. Box 965005 Orlando, FL 32896-5005

PayPal Credit/Syncb P.O. Box 960006 Orlando, FL 32896-0006

PCL Dept.
P.O. Box 1558
GW4W61
Columbus, OH 43216

Receivables Management Partners, LL 2250 East Devon Avenue Suite 245
Des Plaines, IL 60018-4521

Sallie Mae P.O. Box 8377 Philadelphia, PA 19101-8377

Sallie Mae P.O. Box 3319 Wilmington, DE 19804-4319

Sam's Club MC/Syncb P.O. Box 960013 Orlando, FL 32896-0013

Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

Synchrony Bank Attn: Bankruptcy Dept. P.O. Box 965064 Orlando, FL 32896-5064

Synchrony Bank/Amazon P.O. Box 960013 Orlando, FL 32896-0013

U.S. Bank P.O. Box 790408 Saint Louis, MO 63179-0408

U.S. Bank P.O. Box 6335 Fargo, ND 58125-6335

Wells Fargo Home Mortgage P.O. Box 14538 Des Moines, IA 50306-3538

Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306